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CONFIRMATION NO. 6861

Bib Data Sheet

SERIAL NUMBER 09/749,994	FILING DATE 12/28/2000 RULE	CLASS 379	GROUP ART UNIT 2642	ATTORNEY DOCKET NO. BELL-0065/00235
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APPLICANTS

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** CONTINUING DATA ***** None K.L.

** FOREIGN APPLICATIONS ***** None K.L.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/28/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 3	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature K.L.	Initials			

ADDRESS

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TITLE

Systems and methods for least cost routing of long distance or international telephone calls

FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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